

# Kenko Shimbun

December 2002

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U.S. NAVAL HOSPITAL, Yokosuka, Japan

**Gingerbread Fun!** Chef Putnam Yost of Tokyo's New Sanno Hotel icreated a Gingerbread Ski Village, on display in the Hospital Lobby in December. The First Class Petty Officers Association sponsors the display and collects donations for the St. Joseph's Orphanage in Tokyo. **Photo collage by PH3 John E. Woods.**



# Outstanding Support to Fleet, Force, Families

An eventful year is nearly over and, as this goes to press, we're preparing to enjoy the wonders of the holiday season, reflect on the year just past, and get ready for the year ahead.

No matter where you are stationed – at the hospital, at one of our branch clinics, or in EDIS offices, other annexes, and clinics in WestPac – I want you to know how much we appreciate the outstanding service you are providing to our Fleet, Force, and Families during our current war on terrorism.

The ongoing campaign against those who attacked our nation 15 months ago will continue to focus us in 2003. There has not been a more important time in our nation's history to wear the uniform of our nation's armed forces.

President Bush has announced his intention that everyone in the military will receive the smallpox vaccine. DOD, Pacific Fleet, and Navy Medicine are working on directives and guidance to assist us.

CDR Ted Carrell, Director of Occupational Health and Preventive Medicine; CAPT Murray Norcross, Medical Director; and CAPT (Sel.) Chuck Baxter, incoming Medical Director; will be implementing the program here with assistance from LCDR Tim Quiner and others.

Anyone who has seen the briefings on the effects of smallpox knows why this vaccine is so important to protect us and anyone attacked with this biological weapon.

This week the Executive Steering Committee and I had the opportunity of presenting a briefing to Rear Admiral Diaz, acting SG, and the Leadership Council at BUMED, including Admirals Lescavage, director of the Nurse Corps, and VanLandingham, director of the

Medical Service Corps. We told them of our achievements in Emergency Management, Family Centered Healthcare Initiative, and other good news here in Japan.

The Surgeon General's team said they are very pleased with the good work we are doing for our forward-deployed beneficiaries, and asked me to be sure to thank you for the good work you are doing for Navy Medicine.

By the way, congratulations are in order for Chaplain Baughman, LCDR Strong, and everyone else on the Recreation Committee who was involved in putting together a great holiday party for us at the New Sanno. It was a wonderful evening of food, song, and fellowship.

Our nurses recently held a "Corpsman Appreciation" breakfast that made a lot of folks smile. The Oakleaf Club brought Santa Claus to the all hands Children's Holiday Party. And, I've seen many departments spreading the season's joy not only within our walls, but also outside to people in need of our charity and good will.

If you're in Yokosuka, stop by the quarter-deck and look at the exceptionally beautiful gingerbread house on display, courtesy of the New Sanno. Executive Chef Putnam Yost and his crew really outdid themselves this year with a ski lodge theme. It's spectacular!



**CAPT Adam M. Robinson, Jr.**  
Commanding Officer

From my family to you and yours, I thank you for everything you do for our patients, shipmates, and their loved ones. Yuko and I send best wishes to each of you for a joyous and safe holiday season and a peaceful New Year. Please stay safe and sound!

**CAPT Adam M. Robinson, Jr.**  
Commanding Officer



**Kenko Shimbun**

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Captain Michael Seifert, Commander, Fleet Activities, Yokosuka, and Ms. Weberly Hudson (right), Yokosuka Station Chairman, present the Ann Magnussen Award (the highest award for Registered Nurse volunteers) to Ms. Alison Stamper-Levy, Red Cross R.N. and USNH OB-GYN Clinic volunteer.

(Photo courtesy of JOSN Nick Flabi)

## Friendly Neighbor program starts

By Chaplain Barry J. Baughman

The "Friendly Neighbor" program is designed to recruit volunteers to be good neighbors to people in need. At U. S. Naval Hospital Yokosuka, Japan we have two groups of people who may be in need of a good neighbor.

The first is a group of people who will be participating in the "Stork's Nest" Program. The Stork's Nest, located next to the hospital, is specially designed for expectant mothers from various bases throughout Japan. Visiting moms-to-be can stay in the comfortably furnished rooms of the Stork's Nest until they're ready to deliver their baby.

The second group who may be in need of a good neighbor is our Med-Hold (Medical Hold) personnel. These people are active duty military members from in and around Japan who are

recovering from illnesses or surgeries.

The "Friendly Neighbor Program" offers all of us an opportunity to be a good neighbor to people from the "Stork's Nest" and "Med-Hold" programs that need our help. Friendly Neighbors help each other by showing guests around our base, offering rides to and from the NEX and Commissary, taking someone out to eat, or inviting them to worship service.

The first step is getting a volunteer to be a primary Point Of Contact (POC) for each Faith Group. The POC's name, phone number and faith group name will go on a flyer that will be made available to people in the "Stork's Nest" and "Medical Hold" programs. Visitors can then call the faith group's Point of Contact, explain their need, and the POC will give them the name and number of a volunteer on their group's list of volunteers.



*Memories of Japan -- If you have a staff member going away, consider giving a kokeshi doll, on sale by the Recreation Committee. Contact HM2 Tim Bork in the Laboratory for details.*

## Iwakuni nurses join together in fellowship

By LT James W. Mickey, NC, USN

The Branch Medical Clinic (BMC) Iwakuni Nurse Corps Officers recently hosted a Nurse luncheon at the Marine Corps Air Station (MCAS) Iwakuni Officer's Club for approximately 20 Nurses from Iwakuni National Hospital (INH) and Iwakuni Hospital a.k.a. "Dr. Shoji's" on November 22.

This was a chance for the Nurse Corps Officers to meet fellow nurses from local community hospitals and build relationships in support of medical referral activities for MCAS Iwakuni personnel, according to Officer In Charge, Commander Don Albia, Medical Service Corps (honorary NC Officer for the day).

After the luncheon, each person was able to provide a brief introduction on who they were, where they worked, number of years in nursing, and just some general information about themselves. We discovered that we share many commonalities and were able to strengthen the cultural bonds of caring for people between the three facilities.

Following the lunch, the nurses were treated to a guided tour of the Branch Medical Clinic. Many of them thought there's a hospital located near the clinic. They were quickly informed that the main military hospital is approximately 600 miles away.



*Iwakuni Branch Clinic OIC CDR Don Albia (top right) and staff assistant Missie Hamano (front, left) join Iwakuni Branch Clinic nurses to pose with new friends -- Japanese nurses from Iwakuni National Hospital.*



# There oughta be a Shrine for shoppers . . .

*There is! In fact, there are several. Ombudsman Darlene Maravilla shows us where:*

By Darlene Maravilla, USNH Ombudsman

"What's a SHRINE SALE?" Is a question that I am asked frequently, usually after someone hears me mention that my husband and I are going shrine sale shopping this weekend. A shrine sale is a cross between an antiques flea market and a multiple families garage sale (without the garage) held at a shrine. My husband jokingly says it is because the average Japanese doesn't have a garage.

After going to one, many individuals come back with the question, "How can I learn more about Japanese antiques?" The answer is simple: Research and read as much as you can, the library is a good place to start and then go out hunting different shrine locations and don't be afraid to ask questions. The Exchange also carries several informative books on Japanese Antiques ranging from Obi's to Kokeshi Dolls to Pottery.

The shrine sales (or antique markets) can be found throughout Japan. Over the past two years Larry and I have visited several different ones in the local area. You can read about them and get directions from a web site that I found: [www.e-yakimono.net/html/antiques.html](http://www.e-yakimono.net/html/antiques.html). For this article I am going to talk about our two favorite sites, Togo Shrine and Machida Shrine. Both sites operate year round.

**Togo Antique Flea Market at Togo no mori** (On Meiji Dori (Street), instead of making the right turn to New Sanno Hotel you make a left, it is about 4.5 kilometers on the left side of the street, a Gap store is on the right side a block before. Parking is limited so get there early! The street meters are free until 0700, at that time make sure to feed the meter or you will be ticketed.)

**Address:** Togo Shrine, Harajuku, Shibuya-ku, Tokyo

**Access:** 3 min. walk from Harajuku Station on the Yamanote Line.

**Tel:** 03-3425-7965

**Schedule:** First, fourth, and fifth Sun. of each month, 0400-1500

More than 150 dealers

**Bathroom:** on site at side entrance down steps (male & female western) bring your own tissue.



*Antiques 'to go' at Togo Entrance.  
(Photos courtesy of Darlene Maravilla)*

**Machida Tenmangu Antique Flea Market at Tenmangu Shrine** (On Route 51, instead of making the left turn towards Camp Zama you make a right. Stay on 51, bearing right at a couple curves, at the Y intersection (it has a stoplight) bear right and it is within the first block on your left. If you curved left up over a small bridge or overpass, you've just missed it, around 3 kilometers from Route 16.) Parking is wherever you can find it; don't block any driveways, as this is a residential area.

**Address:** Machida Tenmangu Shrine, 1-21-5 Hara machida, Machida-city, Tokyo  
**Access:** 4 min. walk from Machida Station on the Odakyu Line and the JR Yokohama Line  
**Tel:** 090-3314-1994 **Schedule:** The 1st of each month, as well as Jan. 8th, 0600-1600  
About 100 dealers

**Bathroom:** on site (co-shared Japanese) bring your own tissue.

If you've never been to one, it's like walking into your grandmother's garage and seeing all kinds of goods from days gone by, as well as some modern day items. You name it a shrine sale has it: pottery, glass, furniture, toys, clocks, baskets, kokeshi dolls, obi, kimono and much more. You never know what you're going to find—sometimes a little treasure, sometimes a big one, sometimes you walk away empty-

handed because nothing caught your eye. I figure that I purchase "something" nearly every time I go, but those some-things are as different as night and day. One time it could be an 1890 pottery piece with a leaf imprint on the bottom, or a 1900 kokeshi doll painted with that rare green vegetable dye, or another time a 1940's "Made in Occupied Japan" key wound wall clock. Prices vary from a couple hundred yen to 2,000,000 yen for a certified "rare" antique statue from a licensed antiquity dealer.

Trust what appeals to you and don't be afraid to buy something you're not sure of. That is important. Buy what you like and from not knowing anything about a particular piece you'll seek out information and it will be a learning tool for you. That has happened so many times with my husband and me. I buy something and research it (the web is a great place to start) and we broaden our understanding of the complex world of Japanese art. I've actually learned quite a little bit on Japanese pottery, dolls, and clocks. Enough to know what I like and why I like it, but not enough to claim an expert opinion.

Walking around the open stalls and eyeballing the wares at markets is also a lot of fun in and of itself. Pick up the pieces, look them over, ask questions. At larger fairs like Heiwajima, look around before purchasing—you might find the same item for a lesser price. Another case in point: I saw a small pendulum clock for 12,000 yen at one stall and another stall three aisles over had it for six times that.

There are a variety of price ranges for items, my husband and I have purchased clocks for as little as 5,000 yen and as much as 30,000 yen depending on the condition and type of clock. I recently purchased a lovely Meiji Kutani *tokkuri* (sake flasks with cups) still in the original box for 500 yen. In fact, if there had been no box with this *tokkuri* set I wouldn't have bought them. The box adds historical value: The label on it dates it and tells who the potter was and sometimes what the piece was meant for; say a retirement gift for a wealthy businessman or an exposition in Tokyo. Of course there is the little problem of the label being written in Japanese, so unless you have a friend with you who reads Japanese you are dependent on the dealer being honest with you in the translation.

I've never had a problem with this.

The markets at temples and shrines usually begin at sunrise and the veteran hunters are there at the crack of dawn, sometime between 0500 and 0600 is usually when I make it. For the amateur bargain hunter it isn't necessary to get up so early. Actually, later in the day is probably better. First thing in the morning, the dealers are confident, but as the day goes on and they're faced with the possibility of lugging that big piece of pottery or clock back home, a reduction in price is a better solution. On the other hand if you want to experience the full range of what is available, the earlier the better. I hate seeing something set aside marked SOLD when it was something that I would of liked.

It's all right to haggle over the price. Some dealers ask ridiculous prices, thinking to take advantage of the unknowing gaijin. If a piece is marked with a price (half the time they aren't), make sure you ask for "best price" after which I usually give a counter offer of about half of the best price and take it from there. Very rarely has this technique "insulted" a dealer to where he will ignore me. Most likely, the dealer will get into the "spirit" of the deal and go to great lengths to explain to you the unique points of the item in question.

One thing, you would be wise to bring a small pocket calculator or a pen and paper to note your prices on. My bargaining has backfired a couple times when I thought I was offering 1,000 yen for something only to notice the dealers smiling shake of the head and the price when written down translated to something closer to 10,000 yen. On the other hand, once when bargaining for a piece of pottery the woman behind the counter and I finally agreed upon the price of 3,000 yen for one piece (or so I thought). Only to have her wrap up all of the pots I had inquired about during my selection process, three pots for 3,000 yen, as you can imagine I was quite happy with that deal.

I once bought a small bone carving "scrimshaw" for 1500 yen after I laughed at the initial 10,000 yen price, the dealer started laughing too. Don't be too cheap though, or you'll probably only collect pieces that'll wind up in YOUR garage sale later on down the line. Sometimes you get a bargain (*horidashimono*), but other times the dealer is unwavering, and if you want it there's no choice but to pay up. It's better to have the satisfaction of ownership (at a higher price) than to look back a few weeks later wishing you'd bought that piece that you just can't get out of your mind. Been there, done that!



*"Torii ni kimashita" -- Finding the best bargains in the shadow of a shrine.*

My husband and I usually bring anywhere from 20,000 to 40,000 yen with us, only once in two years did we ever wish we had more. Bring a mixture of bills with you, I always feel "cheap" when I pay for something that I've bargained down to 1,000 yen with a 5,000 or 10,000 yen bill and it saves the dealer the hassle of attempting to break a large bill first thing in the morning.

Below is a list of a few markets around Tokyo and other places. If you don't see one in your area, please check out the MAP section of the site I mentioned earlier in the article. Or e-mail me and I'll see if I can find one in your area — markets are held all over Japan.

- **Heiwajima** is a very large gathering of dealers, about 250, that takes place five times a year. To get there, take the airport monorail from JR Hamamatsucho Station and get off at Ryutsu Center.

- **Togo Jinja.** The first and fourth Sunday of each month; just a five-minute walk from JR Harajuku Station

- **Arai-Yakushi.** The first Sunday of each month, near Arai-Yakushi Station on the Seibu-Shinjuku Line

- **Nogi Jinja.** The second Sunday of each month, near Nogizaka Station.

- **In Shizuoka,** near Shizuoka Station. The second Sunday of each month at the small shrine across from Seibu department store near Shizuoka Station.

- **Toji Temple.** In Kyoto, on the 21st of each month — a big market.

**PS (100 Yen Store)**— There is a seven-story 100 Yen store (opens at 1000) within 5 blocks of the Machida Shrine sale.

After shopping at the shrine sale, we usually go to Camp Zama for a Burger King Breakfast/Lunch and then back to the Machida Shrine where we find a parking spot. We then walk back to the main road and make that left up the road/bridge down to the other side where we cross the street and go left.

You'll see an outside walkway going up; take it to the second floor level. You'll see store entrances along the walkway and you'll see the 100 Yen store entrance about a block down; everything is on your right side. It's a great place to shop.

**PSS** — The Oriental Bazaar store (opens at 1000) is about five blocks from the Togo Shrine.

Go right back out the main entrance of the Shrine onto Meiji Dori street past the Starbucks Coffee house to the big intersection. Make a left up the street past The Gap about a block and one half to the overhead cross walk. Cross there to the other side, about 20 feet up on your right is the Oriental Bazaar, another very nice store (fixed prices) with goods ranging from pottery, baskets, furniture, jewelry and woodblock prints; low to high end prices; credit cards accepted.

**Good luck and good shopping!**



## TAR-get!

Recent studies say teen smoking is down, but a startling 25 percent high schoolers smoke by graduation. Key to preventing this health hazard is getting information to younger students. The tobacco industry works to get kids hooked; the Tar Wars program counters that effect. HM2 Raul Huerta and crew took the Tar Wars message to schools last month. (Photos courtesy of HMC(SS) Denfield Thomas)



# Eye Clinic sees continuous improvement

By Brenda Welding, Kinnick Journalist

If you need a new prescription for your glasses, do you know where to call and make an appointment? How about the USNH Yokosuka Eye Clinic, located on the fifth floor of the Yokosuka Hospital

To make an appointment for prescriptions call 243-5371. You must give your social security number, your sponsor's last four digits of their SSN, your phone number, and tell them what the problem is

The eye clinic recently got some new equipment; for example, they

have a corneal topographer, which maps the cornea and detects corneal diseases and fits contact lenses for specialty cases.

If you are having eye problems or if there's an eye emergency, call 243-7141. There, you can set up an appointment or other assistance and directions, depending on the problem.

The Eye Clinic is open from 7:30 am to 4:30 pm. If you call after these hours you will get a recording but the recording can't take messages so you can try calling the next day.

The staff at the Eye Clinic looks forward to serving you.

# Lollita gets under our skin about skin we're in

By HNE. Lollita Williams

Our skin is the largest most visible organ of the body and how we take care of it is a sign of our overall well-being. We've all said it one time or another... "that person is so smart, so together and they have the prettiest skin." This is because our skin is usually a focus of beauty or attractiveness.

We all know the basic skin care rules: cleanse, moisturize and use a sunscreen; yes, even dark blue sailors need sun protection. The products change with each skin type but the regimen usually stays the same. If you have oily skin, use a cleanser for your skin type and don't scrub hard when you wash your face, this only irritates the sebaceous glands and they produce even more oil. Follow with the correct moisturizer and sunscreen.

The same applies for dry skin; use a cleanser, moisturizer and sunscreen formulated for your skin type.

And, guess what? If you fall under the sensitive or combination skin type, you have the same rules. Everybody does.

The best step to take in caring for your skin is to read the products labels and use those specifically formulated for your skin type.

Then, if you have religiously taken care of your skin and still have

problems, talk to your health care provider or consult a dermatologist.

But many of us have yet to realize that our mothers were the best dermatologists; especially for females. Yes some men have problem skin but unless they have too much sugar in your tank, a real man doesn't wake up every morning and put five pounds of make-up on and then work in it, sweat in it and sometimes sleep in it and then wonder what is wrong with his skin.

Our mothers told us a good thing, "Less is more." Most females don't realize that your skin should be healthy **before** the make-up goes on; that way, you don't have to put on a ton of foundation and blush to fake that your skin is in fact... healthy.

Healthy skin has a natural glow and smoothness already. Furthermore, if you have bad acne and then put on heavy make up, people don't see healthy skin, they see bad acne under heavy make up so you really haven't hidden anything.

If you like cosmetics like I do, save the high profile look for special occasions. If you just gotta get your glam on daily, keep it simple, like a little mascara, tinted moisturizer and a gloss. Your skin will love you for it.

Remember to put your best face forward... your own.

(Send your comments to Lollita via: [pao@nhypo.med.navy.mil](mailto:pao@nhypo.med.navy.mil))



# Typhoon Assist

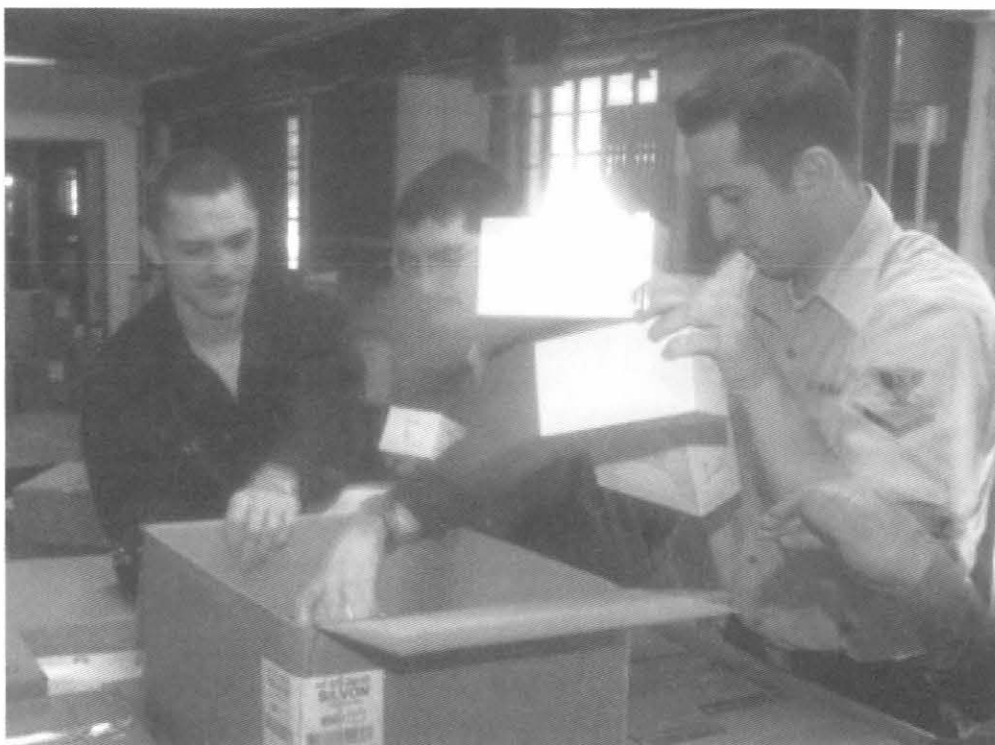
A team at U.S. Naval Hospital, Yokosuka works quickly to box and send emergency medical supplies to Naval Hospital Guam, hit by Typhoon Pongsona earlier in the week.

Hospital Corpsman Third Class Jason Erickson (right) leads shipmates Hospitalman Welton Davis and Hospitalman Apprentice James Taylor.

USNH Materials Management, under the leadership of LT Alex Taag, compiled, boxed, and shipped 4,500 pounds of contingency supplies within a few hours of being notified.

In the wake of Typhoon Pongsona, Guam has been declared a federal disaster area by President Bush.

(Photo by PH3 John Woods)



## Pharmacy uses technology to ease wait times

By Brenda Welding

USNH Yokosuka Public Affairs

Do you remember the last time you got a medication refill? Did you have to take a number and wait to receive your medication? Now, there are easier ways to get a refill – either online or by phone.

“The online refills have helped tremendously,” says Lt. Samuel Espiritu, Yokosuka Pharmacist. “It alleviates waiting time and it’s easy to get your medication.”

To do it online you go to [www.nhyoko.med.navy.mil](http://www.nhyoko.med.navy.mil), click the image of Japan in the left side of the screen, click “What’s New,” and then click on the USNH Yokosuka pharmacy on-line refill form. Fill out the refill form and your medication should be ready to pick up within the next 24 hours.

Another way is to call the pharmacy by dialing 243-8714 and following the instructions. You’ll be asked for your name, sponsor’s social security number, and a phone number so the pharmacy can call you back if they have any questions. That refill will also be ready to pick up within the next 24 hours.

But, if seven days pass and you have not picked up the medication, it is returned to stock or destroyed, and you will have go through the process all over again.

What if the medication isn’t available?

“If the medication is on backorder or if there is a supply problem we call your doctor and see if there are any substitutes. Or we will go to great lengths to contact Okinawa or neighboring facilities and try to replace it,” stated Espiritu.

If there is a problem, at all, with the medication or refill the pharmacy will contact the patient and the problem can be resolved.

Staff and customers say the refill system has been very successful as well as helpful to busy people.

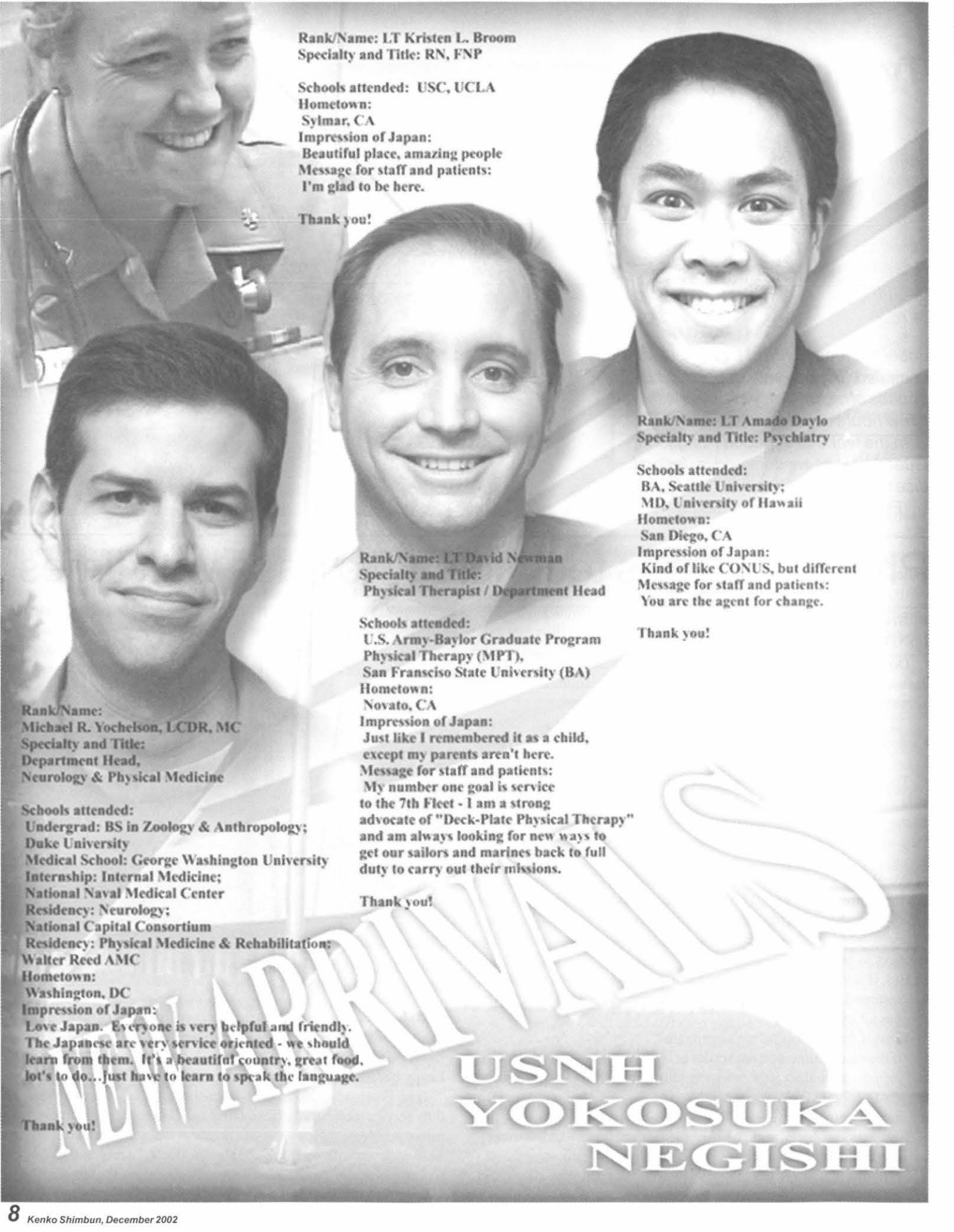


Good customer service eases the wait, too. (Photo by PH3 John Woods)

“The refill system through the internet or phone has really decreased the wait time for people on their lunch break or anytime for that matter,” says HM3 Emmanuel Calayan. “People have walked away smiling and happy because they did not have to take a number and wait.”

The Pharmacy also has an “over-the-counter” program for active duty service members and their families. “There are sometimes cases of minor problems that don’t need a prescription, and we can solve a runny nose or fever with over-the-counter products,” according to Espiritu.

For more information on refills, medications, or other services call the USNH Yokosuka pharmacy at 243-5669.



Rank/Name: LT Kristen L. Broom  
Specialty and Title: RN, FNP

Schools attended: USC, UCLA  
Hometown:  
Sylmar, CA  
Impression of Japan:  
Beautiful place, amazing people  
Message for staff and patients:  
I'm glad to be here.

Thank you!

Rank/Name: LT Amado Daylo  
Specialty and Title: Psychiatry

Schools attended:  
BA, Seattle University;  
MD, University of Hawaii  
Hometown:  
San Diego, CA  
Impression of Japan:  
Kind of like CONUS, but different  
Message for staff and patients:  
You are the agent for change.

Thank you!

Rank/Name: LT David Newman  
Specialty and Title:  
Physical Therapist / Department Head

Schools attended:  
U.S. Army-Baylor Graduate Program  
Physical Therapy (MPT),  
San Francisco State University (BA)  
Hometown:  
Novato, CA  
Impression of Japan:  
Just like I remembered it as a child,  
except my parents aren't here.  
Message for staff and patients:  
My number one goal is service  
to the 7th Fleet - I am a strong  
advocate of "Deck-Plate Physical Therapy"  
and am always looking for new ways to  
get our sailors and marines back to full  
duty to carry out their missions.

Thank you!

Rank/Name:  
Michael R. Yochelson, LCDR, MC  
Specialty and Title:  
Department Head,  
Neurology & Physical Medicine

Schools attended:  
Undergrad: BS in Zoology & Anthropology;  
Duke University  
Medical School: George Washington University  
Internship: Internal Medicine;  
National Naval Medical Center  
Residency: Neurology;  
National Capital Consortium  
Residency: Physical Medicine & Rehabilitation;  
Walter Reed AMC  
Hometown:  
Washington, DC  
Impression of Japan:  
Love Japan. Everyone is very helpful and friendly.  
The Japanese are very service oriented - we should  
learn from them. It's a beautiful country, great food,  
lot's to do...just have to learn to speak the language.

Thank you!

USNH  
YOKOSUKA  
NEGISHI



Free! Free! Free! Free! Free! Free! Free! Free! Free! Free! Free! Free! Free!

# Medical Staff Newsletter

By LCDR Dan Fisher, President of Medical Staff

## He's Making a List and Checking it Twice . . .

Thanks to all of the medical staff for the superb effort over this last year. While the achievements may not look like much on a daily basis, in the aggregate there have been huge strides made all over this command. In addition, we have maintained the gains made in years past. . . . . Witness the brief list of accomplishments below:

- Established an active wardroom
- held a very successful Dining In.
- Standardized monitoring committee minutes
- established routine monitors
- Published and updated hospital formulary
- Purchased and distributed of Tarascon's Pocket Pharmacopiea
- Completed review of Advance Directives policy
- Amended Bylaws twice
- Privileged and re-privileged 100's of providers
- Caught up on peer outpatient chart review
- Re-aligned ECOMS and representation to include BMC's
- Provided several hundred days of TAD coverage to clinics
- Records Committee began monitoring outpt. records review
- Standardized reporting of ECOMS subcommittees
- Purchased new scopes for surgery clinic
- Began TAMC tumor board conference
- Began TAMC ethics conferences
- Began affiliation with ECHO-PAC
- Re-named and updated MSBOS
- Completed Users Manuals for Lab, Radiology, and Pharmacy
- Created comprehensive orientation program for new physicians
- Established Intranet site for medical staff
- Hosted Clinical Pathological Conference with Yokosuka Kyosai Hospital
- Education plan began getting direct feedback from PI monitors
- Completed 26 CME lectures at Wednesday Provider's meeting
- Implemented History part 4's
- Created and began using Transportation Flowsheet
- Published a transcription guide and placed on intranet
- Reviewed critical values and notification policy
- Published enteral formulary
- Updated IV contrast administration protocols for Radiology
- Brought Surgery clinic dispensing on-line
- Markedly improved timing and dating of inpatient records
- Standardized Outpatient Record Peer review forms
- Obtained bioethics handbooks and created orientation program
- Updated crash carts to reflect new ACLS protocols
- Negotiated purchase of Pyxis and institution of MedMarx
- Established Tumor Review board
- Installed capability to handle CDC web conferences
- Established PAT to consolidate nursing and physician progress notes
- Revised transfusion review criteria
- Initiated Family Centered Care Initiative
- Opened Stork's nest
- Started "O Genki Desu-ka" column in Seahawk
- Defined Scope of Care
- Held Kanto Plain Tri service symposium
- Began work on Command wide Provider handbook
- Provider wellness
- Added intern representation to the ethics committee

And these are just a few things off the top of my head. There are many more in the works, not yet completed. I apologize if there are achievements I didn't recognize in the list above. . . . . While some of these endeavors may have been directly attributable to the hard work of just a few people, they demonstrate a great deal about the **can do attitude** that prevails here. There is a sense that things can get done. Resulting accomplishments reflect very greatly on all of us. BZ to all and. . . . . Keep up the strong work. There are still things on the To Do list.

(Continued on next page)

### It's Not Just a Good Idea, it's the By-Laws

While some have said the Medical Staff Bylaws are an important advance for the cure of insomnia, an annual review by the medical staff is both important and mandated by BUMED and JCAHO. Basically, the bylaws outline the relationship between the hospital organization (BUMED as represented by CAPT Robinson) and individual practitioners. This contract governs details from the specifics of consultation to the documentation of restraints and a whole lot in-between. The Medical Staff owns a big portion of the bylaws and is free to suggest alterations as needed to improve care here. Alterations in format and content must be recommended by the staff and approved by CAPT Robinson. Neither the hospital organization nor the Medical Staff can unilaterally alter the Bylaws.

This year we have the luxury of being able to review the Bylaws on our own time in the privacy of our own cubicle via the intranet. The current set of bylaws resides on the intranet under the Medical Staff Folder. It is cleverly labeled Bylaws. Read the "Read Me First" document first.

Every medical staff member should take some time to visit the site and review the Bylaws. Concerns, criticism, comments should be directed to me or to LT Chris Nasin for compilation.

Deadline for comments is prior to the next ECOMS meeting which will be in January at a date to be announced (likely the third Wednesday, 15<sup>th</sup> at 1300). At that time we will review comments and make recommendations to the CO. If there are no revisions, we will recommend approval of the Bylaws as is.

### Pain in the House

LCDR Michael Yochelson has opened a Pain Clinic which will be run out of the neurology spaces. He did a residency in both neurology and physical medicine and rehabilitation, so he has plenty of experience with things that hurt. He was recently credentialed to practice here and wrote the Pain Clinic Policy and Procedures which will be disseminated to all and published on the intranet shortly. This will mirror and expand upon the NH Pain Management Manual previously produced by CDR Turk.

Basically the pain clinic will provide an additional resource for patients who suffer chronic pain syndromes. Candidates can have focal pain, such as low back pain, chronic knee pain, etc. or more generalized pain such as fibromyalgia, generalized arthritis, etc. The pain should have existed for more than 3 months and be poorly responsive to a number of different treatments. Patients should be identified by their primary care providers or another specialist (e.g. orthopedics); self-referrals will not be accepted at this time. The pain should be affecting the patient's quality of life (e.g. unable to perform full work duties, enjoy avocational activities, etc.)

Just because a patient has a chronic pain diagnosis does not necessarily mean they should be referred. If they are on a stable treatment regimen they should continue to be managed by their primary provider. This is due to very limited number of appointment slots in the Pain Management Clinic. This is also the reason that acute pain patients will not be seen. If you are questioning whether or not to refer a patient, please call or send an e-mail to Dr. Yochelson and he can advise you. Please submit all consults to "Pain Clinic - Yokosuka."

Further guidance on the Pain Clinic and pain management will be forthcoming. This info will be disseminated electronically and archived on the command intranet.

### Beam Me Up Scotty, but Don't Forget the Paperwork!

Patients transported via ambulance from our facilities (and I mean the BMCs as well) to any other facility (or vice versa) should be accompanied by the newly produced Transport Flowsheet. All thanks to LCDR Hartley and the nursing staff for taking the creativity out of patient movement. This flowsheet is available on the NH intranet under forms under Medical Staff. It's purpose is to document the excellent care we are providing and to help remind us all that there are critical elements involved in any patient transfer. The sheet contains several sections which are nearly self explanatory. If they are not, please contact LCDR Hartley.

### Medical Library Deletes Journals and Invests in Power Tools

The Medical Library has recently deleted several titles from its hardcopy library. This should really not affect very many staff, since these journals were identified as very low use journals by the Library Committee. On the other hand, the Library has recently added approximately an additional one hundred full text titles to the online catalog. This is in addition to full text Ovid and MD Consult collections and many others offered by the Naval Medical Information Management Command (NMIMC). This leverage of technology has allowed the command to save money while improving services for the average user.

The hindrance to using these on-line resources is staff unfamiliarity with the technology. To correct this, CDR (sel) Weiner and others have been placed the medical staff training schedule to teach us all how to use these powerful tools

### Setting the Record Straight

Medical records documentation and completion rates have markedly improved over the past year. These is due to the efforts of many, from the nursing and corps staff on the wards who complete the charts, to the transcriptionists who make it all legible (and sometimes readable), to the coders who translate medicine into money, to the committee who oversees the process and to CAPT Norcross's 24 pitch red Gothic emails reminding us to stop by and look at our boxes. . . . . to the docs who eventually sign the whole thing off. Bravo Zulu.

LCDR Ron Parker has taken over as chair of Medical Records Committee and will continue to monitor the gains we have made. Besides records review, other duties of the Medical Records Committee are:

- Approve all form overprints - POC is LT Dantes
- Approve a hospital abbreviation list Q 2 yrs - POC is LT Horcher
- Ensure that narrative summaries from local hospitals are translated and put in outpatient records - POC LT Dunbar-Reid
- Approve secondary records - Proposed POC is LCDR Strong
- Tracking of outpatient record review (NOT QA) - Proposed POC is Dr. Remington

### Formulary for Success

New 2003 Tarascon Pharmacopoeias have been received and distributed to providers at the hospital and branch medical clinics who arrived in the summer or fall of 2002. Providers who arrived prior to that should have received the 2002 Pharmacopoeias and will receive an updated formulary in 2004. Copies of the Hospital Formulary are on line as are the Users Guide to the Pharmacy



## Potassium: Solutions Were Part of the Problem

There are three pre-made KCl IV preparations kept in stock in the pharmacy now to reduce the potential for medication error inherent in making admixtures. They are:

- 20 mEq/L KCl in 1000 mL NS
- 20 mEq KCl in 100 mL NS
- D5 1/4 NS with 20 mEq KCl/L

To prevent a potentially serious error, the pharmacy will no longer make admixtures containing KCL. Please restrict your prescribing to one of these already prepared formulations.

## Don't Get Cross 'Cause the Type isn't Held

To reduce potential error and to hasten delivery of blood products to patients, the practice of Type and Hold has been discontinued. This was a policy of routinely taking blood from patients and holding it in the lab, "just in case." If blood were needed for the patient, the tube could be pulled from the refrigerator and subsequent typing and crossing could be performed.

Sounds like a good idea? Not really, and here's the logic.....First some facts:

- We are a small command with limited blood supply. The number of specific typed and crossed units that could be supplied at any given time for a given patient is limited. Our blood supply is controlled by the ASBBC (Armed Services Blood Bank Center), Okinawa not by us. While there is no certain number of each type routinely held here, a good rule of thumb is that anything more than a few units cannot be guaranteed. Patients requiring transfusions of more than a few units may receive type-compatible and/or O negative blood at the discretion of the blood bank.
- It takes as much time to process Typed and Held blood as it does to process blood drawn fresh from the patient. There are no laboratory shortcuts. Any time savings would be in the time it takes to draw the blood and transport it to the lab.
- Random lab errors are directly related to the volume of samples processed.
- Clerical errors are the single most common source of transfusion reaction.

Given these limitations it would seem that patients who have large and ongoing acute blood loss would best be suited by transfusion of O negative blood as they are going to end up getting O negative blood once they exceed our type specific stocks. This is not the teaching at major institutions where there are many units of any type blood one could desire. Transfusing O negative blood carries low risk for transfusion reaction. Emergency-release O negative can be available within 10 minutes as opposed to crossmatching of type specific blood which if uncomplicated may take up to one hour....

Of course a Type and Screen may be ordered for any patient, at the Provider's discretion. Providers are urged to review the MSBOS and speak with their DH's or Directors for guidance.

How do you decide which transfusion reactions to report to the blood bank? You don't! Each and every transfusion reaction, regardless of how explainable or seemingly insignificant, must be reported to the Blood Bank as soon as it is discovered.

### **Guidelines to Live By and Die For**

The Clinical Applications Group has been busy reviewing guidelines from a variety of sources and working them to make them ours. They have implemented guidelines for dysuria in women, acute otitis media, fluoride supplementation, pediatric UTI, and tobacco use cessation. You can find these easily by looking on the command intranet, under Medical Staff Resources, then under Clinical Pathways. Outpatient chart review should be noting whether documentation is in accordance with established hospital guidelines.....

The US Preventive Services Task Force and the Agency for Healthcare Research Quality have been identified by the DOD as the source for standards regarding the provision of clinical preventive services. These guidelines cover almost every preventive service you can imagine. They are updated on a routine basis, but are so broad and general that they are relatively stable. The guidelines are evidence based consensus guidelines synthesized from all the major specialty organizations and provide clear and graded recommendations. Our task is to make sure that we meet the USPSTF/AHRQ.

To this end, we have re-defined the Well Woman Exam based on the USPSTF guidelines. Forms have been re-engineered to assist clinicians with making the right choices based on risk factors identified at the exam. Forms will be available soon.

The USPSTF recommendations can be found at [www.ahrq.gov/clinic](http://www.ahrq.gov/clinic) under Preventive Services. A link to this website can also be found under the Clinical Pathways section of the intranet.

### **Stork's Nest Not for the Birds**

NH Yokosuka has recently opened the "Stork's Nest" as part of the Navy's Family Centered Initiative. The Stork's Nest is a group of private rooms in building 1407 (next to the hospital) in which pregnant women from outlying areas can stay during the final few weeks of their pregnancy. This free service allows them to be close to medical care while maintaining many of the comforts of home. Each of the rooms is equipped with TV/VCR, microwave, refrigerator, bed, sofa, and gliding rocker. In addition, there are free laundry facilities, and a lobby area provides a kitchenette and large screen TV. Other children may stay in the nest with their mother as long as there is an adult to care for them when mom goes to the hospital.

LCDR Hall, a reserve nurse, has come back on active duty to take over as a full-time case manager for the storknesting initiative. She will coordinate appointments and provide discharge planning for stork's nest patients. Welcome and thanks! For more information about the program contact LCDR Hall at 243-5005. Several patients have already nested and flown the coop. As expected feedback has been very good.

### **Double? No Trouble!**

The Perinatal Advisory Committee (PAC) recently affirmed that we could safely deliver routine low risk twins at greater than 35 weeks EGA if we could ensure the ready availability of "two of everything you might need for a regular delivery." This sounds simple, but in actuality takes a great deal of planning and preparation. The PAC and the departments of OB/GYN, Family Practice, and Pediatrics have been hard at work clearing the ground for twin deliveries to take place here. They are in the process of putting the equipment, personnel, and training in place so that double presents no trouble. One of the key remaining pieces has been the purchase of an additional neonatal transporter. Thanks to LCDR Hawkins that equipment is on its way. According to the PAC there is not, nor will there ever be, a plan to expand routine delivery to anything more than twins.

***Happy Holidays and New Years to all! -- Dan Fisher***

# AWARDS



**LCDR TIMOTHY QUINER**  
-NCM-



**HM1 ROLANDO ANACHIA**  
-NAM-



**HM3 SARAH PECK**  
-NAM-



**HM3 STEVEN SORANO**  
-LOC-



**MS. DEBRA DAVIS**  
-LOA-



**MS. CHIHARU SUYAMA**  
-LOA-



**LCDR KELLY NICHOLS**  
-PROMOTED-



**LT MARY ESCUSA**  
-PROMOTED-



# Navy Dentists' History a Big Hit in Japan

A Japanese dental professor can only imagine what it would be like to provide dental care on board a ship or near a battlefield. Recently, dentists from U. S. Naval Dental Center Far East (USNDCFE) shared their history and gave the professors of Kanagawa Dental College a taste of operational dentistry.

U. S. Navy dentists were invited to the 37<sup>th</sup> Kanagawa Odontological Society's Annual Meeting. There, they gave a presentation on the history of the Navy Dental Corps – at sea, on shore, and in the field.

According to Dr. Satoshi Ino, Director of the Department of Prosthodontics at Kanagawa College, "It was nice to have a poster session to introduce the U. S. Navy Dental Corps. We think it is important to continue our friendship."

The poster presentation was organized by Navy Dentist LT Patrick Fox and USNDCFE Executive Officer CAPT Lance Baumgarten and offered a 90-year perspective through WWI, WWII, Korea, Vietnam, the Gulf War, and events through September 11, 2001.

In the aftermath of the September 11 attack, local Japanese dentists showed solidarity with their American counterparts by raising donations for stateside victims and by assisting with the USNDCFE's charity efforts for local orphanages. This year, on the one-year remembrance of 9/11, the Kanagawa Dental College – located next door to USNDCFE and the Naval Hospital – displayed the American flag.

According to CAPT Baumgarten, the Japa-



*U.S. and Japanese dentists learn together at a recent conference.*

nese dentists were eager to learn more about their American counterparts.

"They were really excited about it. I think they're very interested to know who we are, what we do, what we represent."

He continued, "When we started talking about how we support the Navy operationally, they were interested in other countries dentists and technicians serve in and what we do aboard ships such as aircraft carriers and other ships that have dental personnel. And, they were very interested in what we do at sea and in our mobile units and portable equipment – that we'll go with the Marines."

The dentists meet periodically to exchange information and learn from each other.

"They've had multiple visits here, looking at our clinical spaces," said Baumgarten. "And,

likewise, they've invited us to their college to look at their clinical spaces their training programs."

Baumgarten says the camaraderie pays dividends beyond dental and the Navy.

"The interaction, I think, starts at a small level. It's a dental community, but I think it spreads to the community as a whole," he said, "because just think of the contacts they have with their patients and where they share information about their good relationship with the U. S. Navy and the Dental Corps. It's one of those things that starts small but can spread throughout the community."

USNDCFE has invited the dentists to the next annual Tri-service (Navy, Army, Air Force) meeting, to be hosted by the Navy this year at the New Sanno in February.



*Holiday Cheer! Ms. Jensen and young friends performed holiday carols on piano on December 17th. Earlier in the day Ms. Bantug's class came from The Sullivans School with Rudolph the Dancing Reindeer . . .*

*(Photos by Tom Watanabe)*

The staff in Industrial Hygiene and Occupational Health Department provided good customer services. They went out of their way (extra mile) to help me with my needs. Thank you.

Thank you, **LT Sara Brown of Atsugi Branch Clinic** for doing a world-class job of marketing the new Stork's Nest. **LT Brown** and **CDR York-Slagle**, **CDR Fillion**, and **LCDR Hall**, make a great team for Fleet, Force and especially Families -- through the help of the Stork's Nest. Domo Arigato!

All the staff of Occupational Health Department is very helpful and considerate. Patients are not left sitting and waiting without knowing what is happening. They are the most considerate people in the hospital.

I know I cannot name all the people who care for me, but still, I want to say "Thank You" to the emergency staff, nurses, and the doctors of **Iwakuni Branch Medical Clinic** who took such wonderful care of me. They were all so attentive and professional. Thank you for having the demeanor and skills to be so good at what you do.

**LT Cedric Corpuz** prepared for my check-in process very well so my arrival was uneventful. **LT Jeffrey Huff** was also very helpful on the night of my arrival. **Ms. Etsuko Nakano** was very gracious in offering on two separate occasions acting as a "tour guide" for me and other reservists.

**LTJG Sarah Yuengling** was great as well as my health care provider, **LT Kelly Nichols**.

Thank you to **Ms. Yuko Sakai**, who helped us with a quick job fill.

I received outstanding patient care and support from both **ENT Clinic** and **Ward 5B**. As soon as I got to ENT Clinic, I was diagnosed immediately by **Dr. (LCDR) Peter Weisskopf**. **LCDR Weisskopf** was very knowledgeable and answered all of my questions. He is an excellent provider. **LT Linda Kowalski** made special efforts to make my first hospital stay comfortable as possible. **ENS Horace Steward** kept my night quiet and uneventful. Although he has full of spirits, he allowed me to sleep well. **LT Kowalski** made my discharge process very smooth and timely. Special thanks to **LT Kowalski** in making my first overnight stay. The corpsmen on **Ward 5B** were very polite and professional. "Thank you" to all of you for your care and service.

I would like to thank a Red Cross volunteer in OB/GYN Clinic, **Ms. Consuelo Rodriguez**. She is very helpful and is always smiling. She always wishes me a good afternoon. I would like to thank her again for all her help. I am sure that OB/GYN Clinic also thanks her.

The staff at **D Desk** provided outstanding care by making an appointment for my wife. **LCDR Scott Anderson's** professionalism and quality of care were also appreciated. They have helped tremendously in restoring the image of quality health care.

I received a superb customer service from **HM1 Aaron Thomas**. On the night he was on duty, he helped my client to send a message to one of the ships via American Red Cross. We appreciate his courtesy and helpfulness.

Since I was stationed in Yokosuka, I have received some of the best care from **Naval Dental Center, Far East**. And being able to get my refills on line surpasses my expectations of the care given by the hospital. The website is also a great tool itself and has been very useful in finding information I need before having to walk through the doors of the hospital. Keep up the great work.

**Ms. Akiko Nakatsu** from Managed Care Office was very professional, helpful, and courteous.

It was very helpful to have the translator from Managed Care Office. **Ms. Akiko Nakatsu** ensured that I could be comfortable and relaxed.

I would like to thank **Dr. (LT) Jacqueline Jones** and **LT Carlin Callaway** for their professionalism. I brought my son to ER for urgent care, and they provided outstanding medical service. Great work!

**HM3 Jim McLellan** was extremely efficient in his duty. He went out of his way several times to make sure that I was well informed o.

In my 22-year career in the foreign service, I have never been treated by a finer physician like **Dr. (LCDR) Dan Fisher**. He took his considerable education and put it to work effectively. His patient care is truly outstanding, and his ability to explain effectively in layman's terms is perfect. Kudos to an excellent doctor, **Dr. Fisher**.

**Pharmacy Department** has great automation.

I would like to thank **Dr. (LCDR) Andrew Schiemel** for the excellent care he has provided for my son. He has helped to alleviate some of my frustrations and ignorance when it comes to the healthcare of my son. I cannot say enough about his competence, knowledge, and compassion that made all difference. I appreciate his willingness.

**BZ** to **HM3 Alfred Souza** for going out of his way to help a family whose medical records were not returned by the previous station. He contacted the previous station and searched for the records. Great Job!

I wish to thank the staff of **Optometry Clinic** for taking my appointment although I was late arriving due to heavy traffic. The staff was cooperative. Thanks to **Dr. (LCDR) Daniel Rosenbaum**.

I received the best instruction regarding my administrative check-in process from **LT Cedric Corpuz**. I didn't feel like I was out of home in Japan. Pharmacy Department has excellent and well-experienced staff. All are professional, courteous, and enthusiastic. Bravo Zulu to **HM2 Emerson Andres**, **HM2 Gwendolyn Powell**, and **HM2 Asia Raheem** who go beyond their work.

I would like to comment on the wonderful job everyone is doing at **Physical Therapy Department**. Bravo Zulu!!! Thank you very much!

**HA Fernando Prieto** and **HM3 Gregory Timme** provided excellent customer service and were very professional on my visit.

The staff in Pharmacy Department, especially **HM2 Eric Koski** and **HM3 William Dick** were extremely helpful, efficient, and good-natured. It makes the stress of a hospital visit easier. Thank you!

I had a great experience in **Ophthalmology Clinic**. They were all excellent. I was extremely pleased and satisfied. Thanks.

I sincerely appreciate the quality care I received from **Dr. (LT) Christopher Nasin**. He saw me for an urgent care appointment. He was thorough and compassionate. I felt informed throughout the treatment process. Thank you.

I would like to thank **HM1 Thomas Perez** in Medical Equipment Repair Department for his help in expediting the repair of our Non-Contact Tonometer. This certainly saved us weeks of delay. I appreciate his thoroughness in following up on the status of the repair. Great job and thanks for your support!

**Dr. (LTCOL) Joseph Clark** spent almost an hour and half to address my numerous medical concerns. He was very professional and made me feel like my problem was his primary concern. USNH is so lucky to have such a dedicated and caring doctor on its staff. Thank you.

**HM1 Rod Strait**, **HM2 Kevin McKinney**, and **HM3 Steven Sorano** are excellent clinicians and surgical technicians. All of them have a "can-do" attitude.

I would like to recognize **HR Nicole Karst** who went beyond the call of duty to make me comfortable on **Ward 5B**. She was very kind and patient with me. She also gave me a little inspiration to make a bad situation good.